

POW Study of Former Prisoners of War



STUDY OF

FORMER PRISONERS OF WAR

STUDIES AND ANALYSIS SERVICE

OFFICE OF PLANNING AND PROGRAM EVALUATION

FOREWORD TO THE THIRD PRINTING

The mission of the Veterans Administration is to serve America's veterans and their families with dignity and compassion and to be their principal advocate in ensuring that they receive the care, support and recognition earned in service to this Nation. Former prisoners of war are a special group of veterans who have earned recognition for tribulations faced in service to their country and who have particular needs and concerns. Former POWs have endured extremely harsh and brutal conditions that have had a severe impact on their health, yet it has been difficult to attribute current disabilities to earlier POW experiences and to properly diagnose and treat these individuals without extensive knowledge of POW experiences and the disabilities prevalent among POWs. This Study of Former Prisoners of War, completed in 1980, is being reprinted and distributed to all VA regional offices and medical centers to improve the knowledge of those who adjudicate the claims of former POWs for benefits and those who treat their current health problems. This study presents original information, analyzes previously conducted studies, and provides a reference source for medical literature on diseases and disabilities prevalent among former POWs. also was the basis for enactment of Public Law 97-37, the Former Prisoner of War Benefits Act of 1981.

As a former POW, I found this study to be factual, well written, and informative. It contains a wide range of information about the POW experience and its effects and provides a consolidated reference source that is invaluable in conducting further research. The bibliography identifies the key medical literature on the problems widely found among former POWs. I strongly recommend this study to everyone who provides service to former POWs and to anyone who is interested in the POW experience and its impact.

EVERETT ALVAREZ,

Deputy Administrator of Veterans Affairs

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FOREWORD TO THE THIRD PRINTING

I feel privileged to have been associated with the VA's Study of Former Prisoners of War. I provided a modest amount of advice and assistance during the conduct of the study. I reviewed the study upon its completion and testified before Congress on the study and the resulting legislation, Public Law 97-37, the Former Prisoners of War Benefits Act of 1981. I have also used the study extensively over the past year and a half as Chairman of the Advisory Committee on Former Prisoners of War. It is an extremely useful, excellent compendium that describes and evaluates the repatriation procedures, the types and severities of prevalent disabilities by areas and times, the procedures for determining eligibility for benefits, and surveys and analyzes the medical literature on health problems related to former POWs. It coalesces the studies done up to that time and adds to the increasing body of medical knowledge on the diseases and disabilities prevalent among former POWs. It provides a much clearer picture of the long term or latent physiological and psychological effects of malnutrition, wounds, serious physical abuse, apprehension and stress resulting from prolonged imprisonment.

The Advisory Committee on Former Prisoners of War has found that, although there is a considerable accumulated body of knowledge in the United States and in world literature relevant to disorders derived from deprivation and starvation, it is not widely known or accepted. This study is an outstanding reference source for continuing education. The Committee recommended that the VA reprint and redistribute the study to its regional offices and medical facilities. We are convinced that the knowledge of VA personnel who examine, treat, and adjudicate the claims of former POWs will be improved greatly by this study. Thus, they will receive more appropriate health care and compensation which are not only needed and deserved but are the spirit and intent of Public Law 97-37.

JOHN P. FLYNN

Lt. Gen., USAF (Ret.)

Chairman, Advisory Committee on Former Prisoners of War

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EXECUTIVE SUMMARY

REQUIREMENT FOR THE STUDY

The study requirement appeared as Section 305 of the Veterans' Disability Compensation and Survivors' Benefits Act of 1978 (Public Law 95-479, enacted October 18, 1978). In part, Section 305(a) reads, "The Administrator of Veterans' Affairs, in consultation with the Secretary of Defense, shall carry out a comprehensive study of the disability compensation awarded to, and the health-care needs of, veterans who are former prisoners of war,."

PURPOSE OF THE STUDY

The purpose of the study is to recommend actions necessary to assure that former prisoners of war receive compensation and health care benefits for all disabilities which may reasonably be attributed to their internment.

ELEMENTS OF SECTION 305, P.L. 95-479

As specified in the law, the areas of study include:

- "... descriptions and analyses of the repatriation procedures, including physical examinations, for former prisoners of war and the adequacy of such procedures and the resultant medical records of former prisoners of war;
- "...the types and severity of disabilities that are particularly prevalent among former prisoners of war in various theaters of operation at various times;
- "... a description and analysis of procedures used with respect to former prisoners of war in determining eligibility for health care benefits and in adjudicating claims for disability compensation, including an analysis of the current use of statutory and regulatory provisions specifically relating to former prisoners pf war; and
- "... a survey and analysis of the medical literature on the health-related problems of former prisoners of war."

The law also specified that "the report shall include recommendations for such administrative and legislative action as the Administrator considers may be necessary to assure that former prisoners of war receive compensation and health care benefits for all disabilities which may reasonably be attributed to their internment."

SCOPE OF THE STUDY

The study addresses former prisoners of war (POWs) repatriated from World War I, World War II, the Korean conflict and the Vietnam era. Of the 142,307 Americans captured and interned, 125,253 were returned to U.S. military control. The most recent estimate indicates that 98,494 former POWs were still alive on January 1, 1979.

Former POWs from World War I were excluded from formal analysis during this study but recommendations made in this report are intended to apply to them also. This group, consisting of an estimated 800 living persons, was excluded from analysis largely because of the difficulty in obtaining reliable historical data. American civilians who were captured and interned during the above conflicts were not included in the study.

MAJOR FINDINGS

One finding which is essential for understanding this entire study is that the POW experience - characterized by starvation diet, poor quality or nonexistent medical care, "death marches," executions, and torture - has historically been an extremely harsh and brutal experience.

The major finding derived from the description and analysis of repatriation procedures was that the comprehensive administrative and medical repatriation procedures written for World War II and Korea POWs were not fully implemented in the medical area. Evidence of this comes from a physician review of a representative sample of former World War II POW claims folders, which revealed that many of these records lacked repatriation examinations. Thus, the Congressional concern about the lack of repatriation examinations and resultant medical records among these former POWs is well founded. The claims folder review also demonstrated that while the medical processing of Korea POWs, as indicated by their repatriation examinations, was better than that of former World War II POWs, it was still not completely adequate. The inadequate medical processing which apparently characterized the repatriation of former World War II and Korea POWs is not an issue among former Vietnam POWs, as they received the most thorough repatriation medical examinations and follow-up care of any POW group.

The principal finding from the review of the types and severity of former POW disabilities i that former POWs have a significantly higher incidence of service-connected disability. The dat comparison demonstrated that former Pacific Theater POWs are the most disabled of the PON groups under study, followed closely by former Korea POWs. While not as disabled as Pacific an Korea ex-POWs, former European Theater POWs are still significantly more disabled than other

World War II veterans. While conclusions about the relative disability of former Vietnam POWs must await the outcome of currently ongoing studies, it is apparent from the available morbidity and mortality data on World War II and Korea POWs that those POWs interned by an Asian captor generally received harsher treatment and suffered from more disabilities than other POWs.

The review of the types and severity of former POW disabilities also points out that the most prevalent service-connected condition of the former POWs under study, from the time of their repatriation to the present, is anxiety neurosis. A comparison of service-connected anxiety neurosis among former European Theater POWs with length of internment revealed that anxiety neurosis appears in a significantly greater amount among these former POWs than among other service-connected wartime veterans. This relationship persists regardless of the length of time in captivity.

The central finding of the analysis of law and procedures concerning former POWs is that in determining eligibility for health care benefits or in adjudicating disability compensation claims, the VA generally accords former POWs the special consideration to which they are entitled under current statutory and regulatory provisions.

The survey of the medical literature used a wide variety of sources such as national and international medical journals, follow-up epidemiological studies, personal accounts, and discussions of family and social issues to point out that the POW experience affects their current health status. The published medical literature indicates that many of the present physical problems of former POWs may be attributed to the malnutrition and brutality suffered during captivity, just as many of their present psychological problems can be attributed to the stress of internment. The medical literature review points out that psychological problems, in the form of anxiety neurosis and psychosis, are particularly prevalent among former POWs.

The conclusions presented below are based on the abovementioned principal findings. Each conclusion provides the supporting rationale for a corresponding recommendation. The recommendations include both legislative and administrative actions considered necessary to assure that former POWs receive compensation and health care benefits for all disabilities which may reasonably be attributed to their internment. The first recommendations discussed are the legislative ones; the next are the administrative ones.

RECOMMENDED LEGISLATIVE ACTIONS

Expanded Eligibility for VA Health Care

All of the information and data analyzed in this study show that a significantly greater proportion of former POWs have service-connected disabilities than other veterans who served during the same periods. The former POW has also been shown to be more severely disabled than non-POW veterans. Despite this, two factors make the adjudication decisions extremely difficult: one is the frequent absence of medical information at the time of repatriation and the second is that medical science cannot, at this time, conclusively determine on an individual basis the origins of some disabilities particularly prevalent among former POWs.

In recognition of the higher incidence of disability among former POWs and the difficulties faced when adjudicating claims by former POWs, the VA Department of Medicine and Surgery recommends that former POWs be authorized eligibility for VA hospital care and medical services (other than dental care) for any disease or neuropsychiatric disability, with the same priority as is granted a service-connected veteran seeking care for a nonservice-connected disability. This would assure that former POWs receive health care benefits for all disabilities which may be attributable to their internment.

Recommendation: That title 38 U.S.C. be amended to authorize eligibility to former POWs for VA hospital care and medical services for any disease or neuropsychiatric disability.

Service-Connection for Psychosis at Any Time After Service

Public Law 91-376 grants a presumption of service-connection for a POW related psychosis which becomes manifest to a degree of 10 percent or more within two years from the date of separation from service. The evidence presented in this study's medical literature review indicates that psychosis related to the POW experience frequently appears years after service, and not just immediately after separation. This is understandable in view of the psychological torture and "brainwashing" to which these POWs were subjected.

Recommendation: That title 38 be amended to eliminate the requirement that psychoses suffered by POWs must become manifest within two years following service separation before the rebuttable presumption of service-connection arises.

National POW/MIA Recognition Day

P.L. 95-349 designated July 18, 1979 as National POW/MIA Recognition Day. A 1979 Presidential proclamation announced this event and asked federal government agencies, state and local officials, and private organizations to observe this day with appropriate ceremonies. The VA and DOD commemorated this day with special activities throughout the nation. A special service was conducted at the National Cathedral in Washington, D.C. with participation by the Administrator of Veterans Affairs and the Joint Chiefs of Staff.

Recommendation: That a specific date be designated as an annual National POW/MIA Recognition Day to honor and recognize the extreme sacrifice made for their country by this special group of combat veterans.

RECOMMENDED ADMINISTRATIVE ACTIONS

The following recommendations for administrative action are listed without the supporting conclusions for brevity. The recommended actions include some that have been initiated during the study. Each of the recommended actions will better enable the VA to provide health care and disability compensation benefits to former POWs.

Recommendation: That the VA's forthcoming guidelines on "post-traumatic stress neurosis" include an explicit reference to former POWs as well as other combat veterans, and that these guidelines specifically be used to diagnose, treat, and rate former POWs with anxiety neurosis or similar neurotic disorders as well as other combat veterans.

Recommendation: That the VA adopt a standardized protocol for disability and compensation examinations for all former POWs similar to that developed by the military for the former Vietnam POWs, and that each VA Medical Center designate certain physicians knowledgeable about former POWs and their medical problems to conduct or supervise such examinations for purposes of follow-up treatment and research.

Recommendation: That follow-up medical treatment and research of former Vietnam POWs still on active duty be continued by DOD, and that follow-up treatment and research of former Vietnam POWs separated from the military be conducted at VA Medical Centers using military protocols, with the individual results of such examinations furnished to DOD and the statistical results published and disseminated by the VA.

Recommendation: That the VA take such action as is necessary to establish the proposed advisory committee of authorities in the types of disabilities prevalent in former POWs, use the expert opinions of the panel to assess the medical evidence on former POWs and advise the Administrator and his staff on agency policies and procedures concerning former POWs.

Recommendation: That the VA implement procedures for conducting thorough pathological material examinations (surgical, cytologic, autopsy) of former POWs whenever possible, conduct special mortality studies when sufficient data is available, and provide such data as evidence in individual cases for determination of whether the death was the result of a service-connected disability.

Recommendation: That the VA review its manual and computerized records and forms to identify those which should be identified with POW indicators, and then take the appropriate administrative actions to ensure that these records and forms are so identified.

Recommendation: That the VA periodically emphasize the special health care and compensation procedures applicable to former POWs through its agency information and education programs, and that a copy of this report be provided each VA Medical Center and Regional Office as a reference on former POWs.

Recommendation: That the VA designate certain individual(s) to be the VA Central Office coordinator(s) with the responsibility for assisting in the implementation of ongoing VA programs for former POWs; serving as liaison with individual former POWs, former POW groups, and the DOD Office of POW/MIA Affairs; and monitoring this study's recommendations.